

Work Order ID 87294

87294

Page 1

July-12-12 12:41:41 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|--------------|--------------|
| D412-664-243 | E/DEO |

100

100

DC

Document Control

DOCUMENT CONTROL

Memo

Photocopy bluefile and create labels as per PPP D412-664-203 CHG 008

0.00

0.00

110

110

Packaging

Packaging

Packaging

Memo

0.00

0.00

120

120

CNC Bend 2

CNC Alpha 160 Bender

APTD

BENDING MACHINE - CROSSTUBES

Memo

Bend tube as per Dwg D412-664-243 using CNC bender program 412-aft and Folio FT010

0.00

0.00

DAS
13
9-09

12/4/31

mw 12 67131

DD 12-7-24

SAD 12-7-24

NCR: Yes - / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: date Date: _____QA Closed: 12/08/02 Date: 12/31/02

| | | | | | | | | | | | |
|---|---------|------|-----|---|-------------------|--|--------------|--------------|--------------|--|--|
| Work Order: <u>87294</u> Part No. <u>D 412-664-203</u> NCR No. <u>12-1651</u> | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input checked="" type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data | 12.1.25 | 120 | 1 | CRUSHING AFTER BENDING IS OVER TOLERANCE | 12/17/05 | Acceptable per attached SR | 12/17/05 | 12/17/05 | 12/17/05 | | |
| Equip/Tooling | | | | | | | | | | | |
| Operator | | | | | | | | | | | |
| Material | | | | | | | | | | | |
| Setup | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| Process | | | | | | | | | | | |
| Supplier | | | | | | | | | | | |
| Training | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | |

| FAULT CATEGORY | | | |
|---|--|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input checked="" type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

Work Order ID 87294

87294

Page 2

July-12-12 12:41:41 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Setup/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|---------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|---------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

130

QC15- Crosstube Dimensional Check

0.00

130

QC

Memo

Quality Control

140

Crosstubes

0.00

140

Crosstubes

Memo

0.00

1-Drill pilot holes in tube as per Dwg D412-664-243 using drill Jig DT8550 & DT8551 and drill table DT8577 using #9 holes as per QSI 10 to install towers.

2-Ream hole to finish size in tube as per Dwg D412-664-243 using drill Jig DT8550 & DT8551. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.

3-SCRIBE PART # & BATCH #

4- *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Debur & Inspect for surface damage. Repair damage within limits as per Dwg D412-664-243

JW
RM

12-7-26

RM

12-7-26

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|---|-------------|-------------|---|---|--------------------------|---|------------------------|---------------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Work Order ID 87294

87294

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July-12-12 12:41:41 PM

Item ID: D412-664-203 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Crosstube Aft
 Start Date: 7/19/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 8/17/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 160 *160* QC Quality Control | QC5- Inspect part completeness to step on W/O Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | 0.00 0.00 | | | | | | | |
| 170 *170* HandFXtube Hand Finishing Crosstubes | Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** 1- CLEAN CROSSTUBE WITH WASH'N WIPE | 0.00 0.00 | | | | | | | |
| 180 *180* Outsource2 Outsource process - NDT | Outsource process - NDT per QSI038 4.1 Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Liquid Penetrant Inspection as per QSI 038Or Issue P/O: <u>17556</u> LPI as per ASTM 1417 Level 2 Attach copy of NDT results to work order | 0.00 0.00 | | | | | | | |

DAS
16
9-8

12/4/26

1

12/07/27

12/07-27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Work Order ID 87294

87294

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July-12-12 12:41:41 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 190 | Packaging | 0.00 | | | | | | | |
| *190* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | | | | | | | | |
| | Inspect for transit damage | | | | | | | | |
| | Ensure copy of NDT results attached to work order. | | | | | | | | |
| 200 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *200* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | | | | | | | | |
| | Inspect for damage & ensure results are as per Dwg D412-664-203 | | | | | | | | |
| 203 | | 0.00 | | | | | | | |
| *203* | | | | | | | | | |
| HandFXtube | Memo | 0.00 | | | | | | | |
| Hand Finishing Crosstubes | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | | | | | | | | |
| | 1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN CROSSTUBE BEFORE CHEMICAL CONVERSION | | | | | | | | |

42/7/27 @

12-07-28

AB

12-7-28

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Work Order ID 87294

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Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|---|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 205 *205* QC Quality Control | QC7-Inspect Chemical Conversion Coat Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | 0.00 0.00 | | | | 1 | | | W 12-01-28 |
| 210 *210* SprayPaint Spray Painting | SprayPaint Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** ***Mask underside of crosstube as shown*** 1-Prime inside and outside crosstube as per QSI 005 4.2 2-Paint outside crosstube with White Imron as per DEO D412-664-243 and QSI 005 4.2 PRIME: 121746 Start Time: 7:15 Finish Time: 8:00 PAINT: 122351 Start Time: 4:30 Finish Time: 5:15 | 0.00 0.00 | | | | | | | AS 12-7-29 |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|------|------|---|---|-------------------|---|-------------|--------------|---|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

Work Order ID 87294

87294

Page 6

July-12-12 12:41:41 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 220 | QC14- Inspect Spray Paint | 0.00 | | | | 1 | | | 11/12/07-29 |
| *220* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | Then, Wrap in plastic bag to protect from scratches | | | | | | | | |
| 230 | | 0.00 | | | | | | | |
| *230* | | | | | | | | | |
| Crosstubes | Memo | 0.00 | | | | | | | |
| Crosstubes | Assemble as per Dwg D412-664-203 | | | | | | | | |
| | 1- Install chafing shield as per DEO D412-664-243. Top holes should be facing up. | | | | | | | | |
| | A/R Proscal 890 Batch: <u>122441</u> | | | | | | | | |
| | EXP: <u>1/13</u> | | | | | | | | |
| | 2- Lightly scuff the bonded area using a 320 grit sand paper and clean the area with 41058 wash 'n' wipe | | | | | | | | |
| | 3- Install support with Scotch-Weld DP460 and install clamps as per DEO Dwg D12-664-243 using installation jig DT9024. Torque clamps as per dwg | | | | | | | | |
| | A/R Scotch-Weld DP460 Batch: <u>121368</u> | | | | | | | | |
| | EXP: <u>13/4/13</u> | | | | | | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|-------------|-------------|---|---|--------------------------|---|------------------------|---------------------|---|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

Work Order ID 87294

87294

Page 7

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Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 240 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *240* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |
| 250 | Pick Kit | 0.00 | | | | | | | |
| *250* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | | | | | | | | | |
| 260 | QC4- 100% Inspect kits for completeness | 0.00 | | | | | | | |
| *260* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |



12/9/31

12/7/31

12-07-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Work Order ID 87294

87294

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Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 7/19/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/17/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 270 | | 0.00 | | | | | | | |
| *270* | Packaging | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | Identify and pack for shipping as per PPP D412-664-203 *****Ensure tube is not packaged if curing time is less than 12 hrs, see step 27 for application time & date ***** Time & date of packaging: <u>2h</u> Location: <u>103</u> | | | | | | | | |
| 280 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *280* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

MLJ 12/07/31

MLJ 12/07/31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Picklist Print

July-12-12 12:41:40 PM

Page 1

Work Order ID: 87294

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 7/19/12

Required Date: 8/17/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:E04.02.16Reformat; Added D3189-1K/DS
 IPP Rev:F 06-03-29 Remove Coments on Pick List JLM
 IPP Rev:G 06.12.08 per ECN 886 EC
 IPP Rev:H 07-04-30 As per Rev D JLM
 IPP Rev:I 08-06-12 add comment in seq. 21 DD verified by:EC IPP rev J 11.04.21 DEO D412-664-243-E-1 EC verified DD IPP REV:K 11.10.03 DEO D412-664-243-E-2 DD verf:EC

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

| | | | | | | | | | | | | | |
|-------------------|--|-----------|----|--|--|-----|------|----------|---|---|--|----|--|
| 8 AN6-40A Bolt | | Purchased | No | | | 250 | Each | 124.0000 | 4 | 4 | | SD | |
|-------------------|--|-----------|----|--|--|-----|------|----------|---|---|--|----|--|

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| ST342 | 124 | |
| 120187 | 66 | |
| 120833 | 4 | |
| 121584 | 4 | |
| 121827 | 50 | |

| | | | | | | | | | | | | | |
|-------------------|--|-----------|----|--|--|-----|------|---------|---|---|--|----|--|
| 8 AN6-41A Bolt | | Purchased | No | | | 250 | Each | 65.0000 | 2 | 2 | | SD | |
|-------------------|--|-----------|----|--|--|-----|------|---------|---|---|--|----|--|

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| ST342 | 65 | |
| 120423 | 35 | |
| 121825 | 30 | |

| | | | | | | | | | | | | | |
|------------------------|---------------|-----------|----|--|--|-----|------|--------|----|----|--|---------|----|
| 8 AN960JD616 Washer | NAS1149D0663J | Purchased | No | | | 250 | Each | 0.0000 | 18 | 18 | | M121708 | SP |
|------------------------|---------------|-----------|----|--|--|-----|------|--------|----|----|--|---------|----|

| | | | | | | | | | | | | | |
|--------------------|--|--------------|----|--|--|-----|------|---------|---|---|--|---------|--|
| D2896-1 Support | | Manufactured | No | | | 230 | Each | 18.0000 | 1 | 1 | | 12-7-30 | |
|--------------------|--|--------------|----|--|--|-----|------|---------|---|---|--|---------|--|

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| LG052 | 8 | |
| 80586 | 8 | |
| LG053 | 10 | |
| 74465 | 10 | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|---|------|------|---|---|----------------------|---|----------------|--------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Picklist Print

July-12-12 12:41:40 PM

Page 2

Work Order ID: 87294

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 7/19/12

Required Date: 8/17/12

Start Qty: 1.00

Required Qty: 1.00

D3189-1
Chafing Shield

Manufactured No

230 Each 20.0000

2

2

12-7-30

Location

Loc Qty

Loc Code

FG 4
36065 4
LG053 16
83458 12
83972 4

2

D3595-063-570
RUBBER CUSHION

Manufactured No

230 Each 145.0000

2

2

12-7-30

Location

Loc Qty

Loc Code

FG 8
37971 1
42243 7
LG 78
83294 78
MA1052 59
71534 1
76546 58

2

D412-664-203TRN
Crosstube Turning Detail

Manufactured No

110 Each 3.0000

1

12-07-24

Location

Loc Qty

Loc Code

LG 3
83832 1
83835 1
85390 1

B85988

1

July-12-12 12:41:40 PM

Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|-------------|-------------|---|---|--------------------------|---|------------------------|---------------------|---|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

Picklist Print

July-12-12 12:41:40 PM

Work Order ID: 87294

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 7/19/12

Required Date: 8/17/12

Start Qty: 1.00

Required Qty: 1.00

MS21042L6

Purchased

No

250

Each

479.0000

6

6

Nut

Location

Loc Qty

Loc Code

ST300

479

117677

25

118384

3

118927

48

119075

203

120308

200

MS21920-28

Purchased

No

230

Each

84.0000

4

4

Clamp(per MIL-DTL-8783C)

Location

Loc Qty

Loc Code

FG

5

105884

5

LG050

21

116839

2

118713

4

120054

2

121067

13

LG051

58

121440

8

122204

50

MS21920-30

Purchased

No

230

Each

93.0000

2

2

clamp(per MIL-DTL-8783C)

Location

Loc Qty

Loc Code

LG

30

119529

30

LG051

63

111258

14

121583

49

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

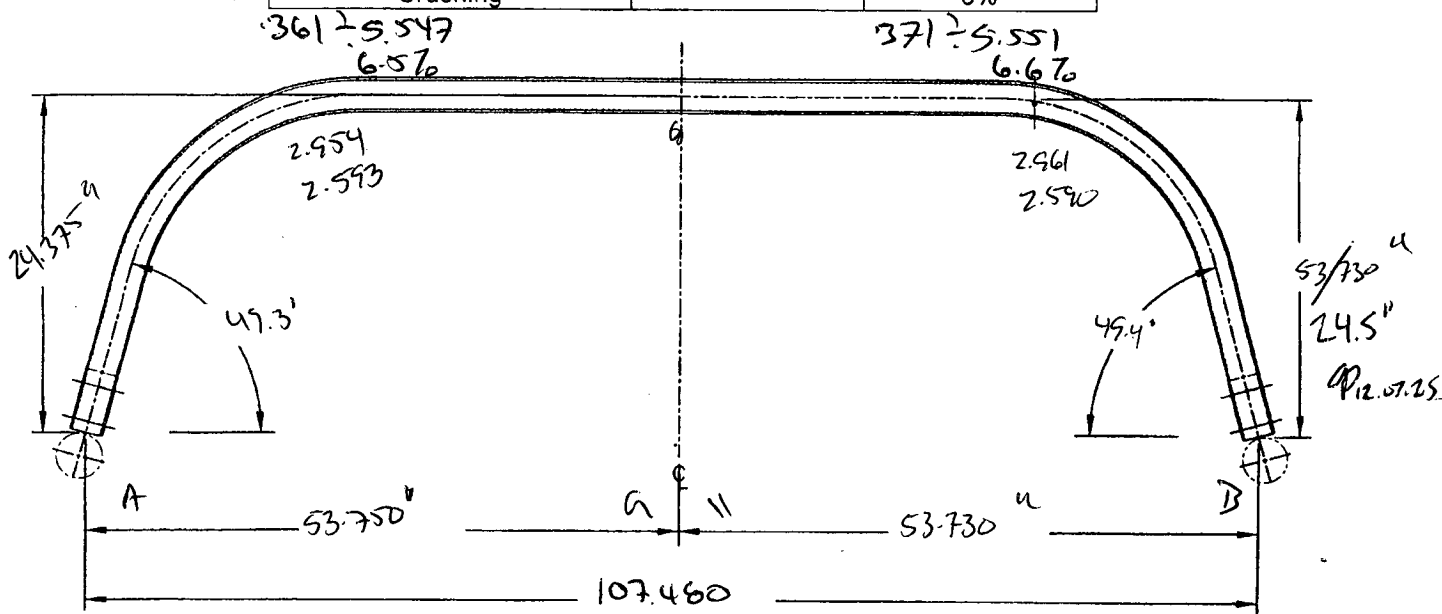
DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|-------------|-------------|---|---|--------------------------|---|------------------------|---------------------|---|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
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| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
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| | | | |
|---------------------------------------|--|--------------|--------------|
| DART AEROSPACE LTD | | Work Order: | 87294 |
| Description: Crosstube High Aft (412) | | Part Number: | D412-664-203 |
| Inspection Dwg: D412-664-243 Rev: E | | Page 1 of 1 | |

| Required Dimension | Min | Max |
|--------------------|--------|--------|
| Height | 24.24 | 24.50 |
| 1/2 Span | 53.59 | 53.85 |
| Angle | 49 | 52 |
| Total Span | 107.18 | 107.70 |
| Bending Passes | 8 | -- |
| Crushing | -- | 6% |



| | Side A | MIDDLE | Side B |
|--------------------|--------|--------|--------|
| Bending Passes | 9 | 8 | 11 |
| Crushing | 6.5% | 6.6% | 6.6% |
| Comments | | | |
| Side A = 9 Passes | | | |
| MIDDLE = 8 Passes | | | |
| Side B = 11 Passes | | | |

| | |
|-----------------|-------------|
| QC15 Inspection | DAE |
| Date | 16 12/16/26 |

| Rev | Date | Change | Revised by | Approved |
|-----|----------|------------------------------------|------------|----------|
| A | 07.02.06 | New Issue | KJ/JM | |
| B | 07.05.08 | Dimensions updated per Dwg rev. D | KJ/JLM | |
| C | 10.02.02 | Dwg Rev updated | KJ | |
| D | 12.04.16 | Added bending, crushing dimensions | KJ | JP |

| Item | Qty -243 | Part Number | Description |
|------|-------------|----------------|---|
| 1 | X | D412-664-243 | CROSSTUBE ASSEMBLY (412 HIGH AFT) |
| 2 | 1 | D6009-129 | CROSSTUBE |
| 3 | 2 | D3595-063-570 | RUBBER CUSHION |
| 4 | 1 | D2896-1 | SUPPORT |
| 5 | 2 | D3189-1 | CHAFING SHIELD |
| 6 | 2 | D2856-600-1009 | ABRASION STRIP |
| 7 | 4 | MS21920-28 | CLAMP |
| 8 | 2 | MS21920-30 | CLAMP (OR MS21920-32) |
| 9 | A/R | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE) |

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6009-129
FINISHED LENGTH = 124.100±0.020 (BEFORE BENDING/TRIMMING)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D412-664-243" AND BATCH NUMBER ON INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 47.0 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 8 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2896-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2896-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-30 CLAMPS (OR -32) WITH D3595-063-570 RUBBER CUSHIONS TO SECURE THE D2896-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF CROSSTUBE PER QSI 035.
- 15) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT

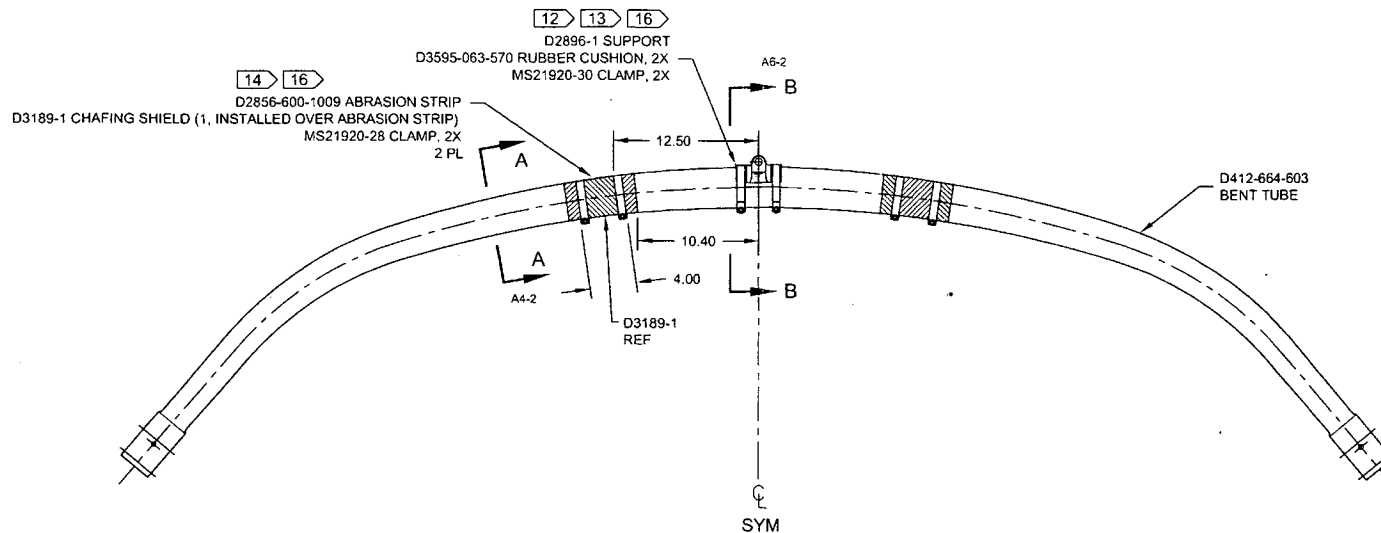
WITHOUT NOTICE
WORK ORDER
NO. 87294MLJ

12/07/13

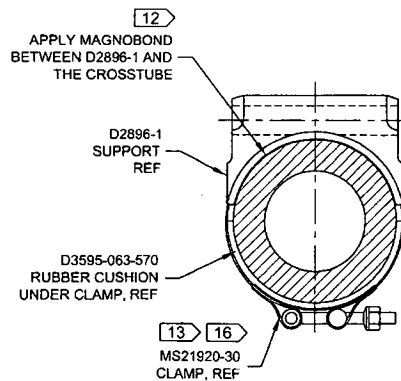
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2009-10-29

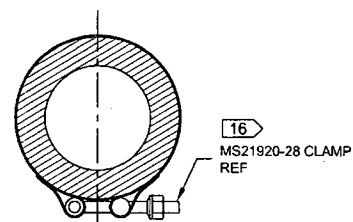
| | | | |
|------------|--|--|--------------|
| E | REFORMAT/REVISE GENERAL NOTES; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A6-3); ADD TOLERANCE (ZN B6-3, C4-3, C8-3 & C5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4. | RF | 09.09.30 |
| D | REMOVE D2732-058, CHANGE TO D3595-063-570 | PH | 07.03.09 |
| C | REMOVE D2856-600-1087, ADD D2732-058 & MAGNOBOND 6398, MS21920-32 WAS MS21920-30 | MB | 06.10.27 |
| B | ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES | PH | 05.02.04 |
| A | NEW ISSUE | PH | 01.10.17 |
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | PH | DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| DRAWN | RF | | |
| CHECKED | PH | DRAWING NO. | REV. E |
| MFG. APPR. | PH | D412-664-243 | SHEET 1 OF 4 |
| APPROVED | PH | TITLE | SCALE |
| DE APPR. | PH | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | <small>COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | |



D212-664-243
ASSEMBLY DETAIL



SECTION B-B D4-2
SCALE 4X



SECTION A-A C6-2
SCALE 4X

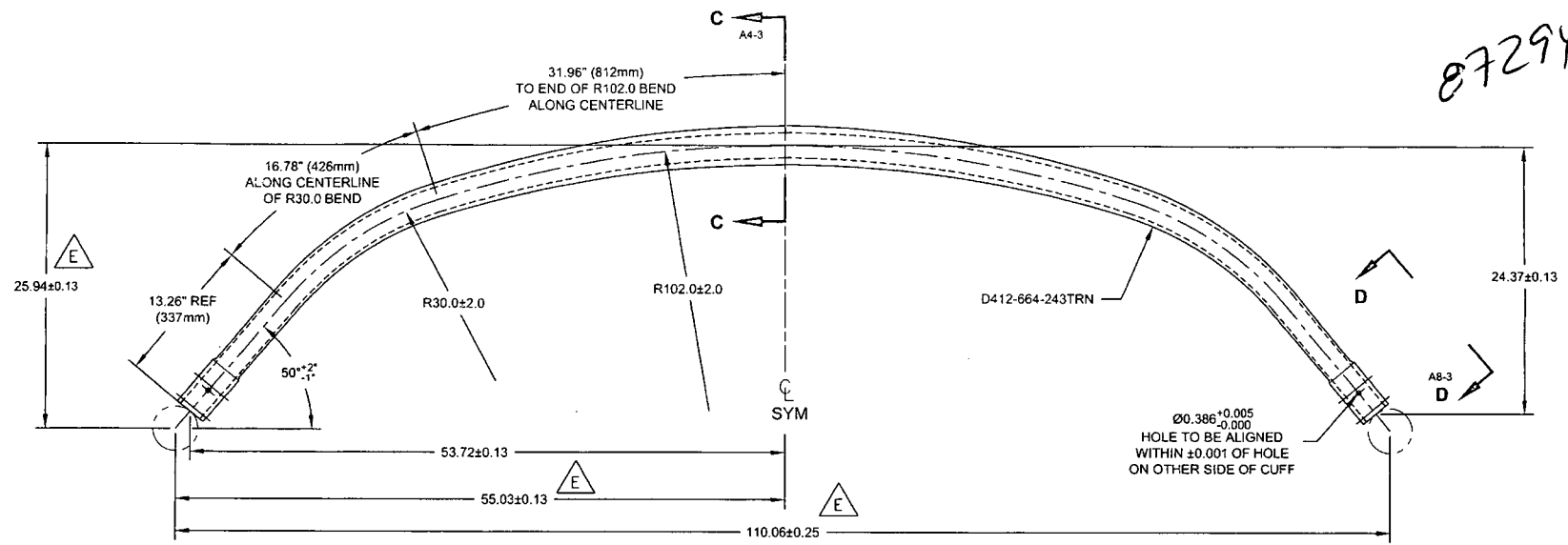
87294

2 DEO ATTACHED

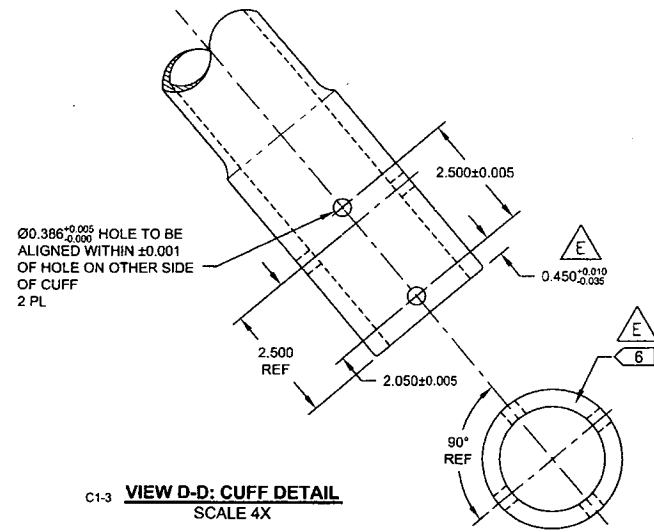
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2009-10-28
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| | | | |
|------------|----------|--|--------------|
| DESIGN | PH | DART AEROSPACE LTD | |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | QP | DRAWING NO. | REV. E |
| MFG. APPR. | JS | D412-664-243 | SHEET 2 OF 4 |
| APPROVED | JP | TITLE | SCALE |
| DE APPR. | JP | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. | |

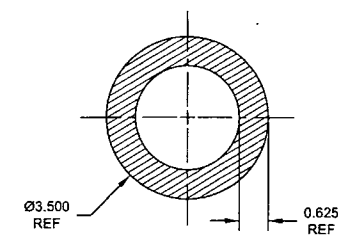
87294



D412-664-603 10
BENDING AND DRILLING DETAIL E



C1-3 **VIEW D-D: CUFF DETAIL**
 SCALE 4X

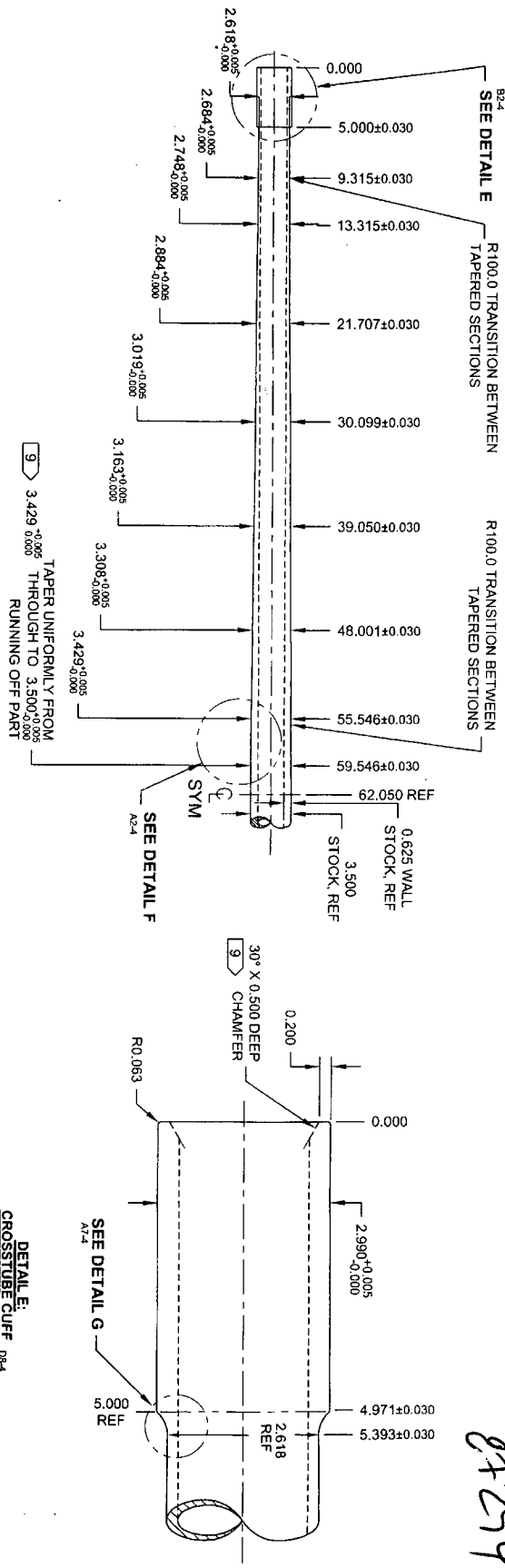


SECTION C-C D5-3
 SCALE 4X

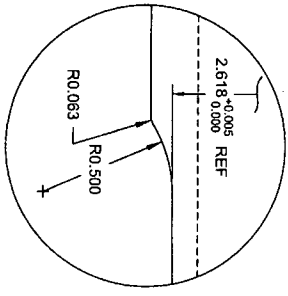
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 2009-10-29
 MP

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|------------|----------|--|--------------|
| DESIGN | PH | DART AEROSPACE LTD | |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | Q | DRAWING NO. | REV. E |
| MFG. APPR. | AS | D412-664-243 | SHEET 3 OF 4 |
| APPROVED | AD | TITLE | SCALE |
| DE APPR. | — | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | COPYRIGHT © 2001 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | |

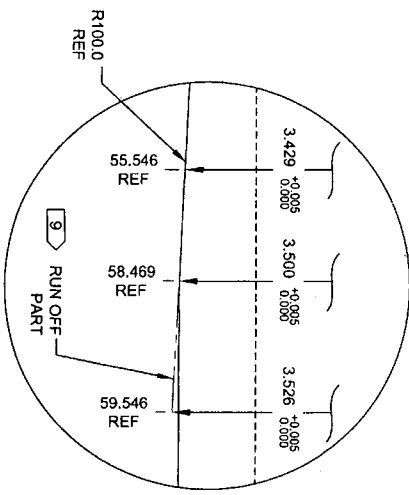
07254



D412-664-243TRN
TURNING DETAIL



DETAIL G:
CUFF TRANSITION
SCALE 10X



DETAIL F:
TAPER RUN-OFF
SCALE 5X

| | | |
|------------|----------|-----------------------------|
| DESIGN | HA | DART AEROSPACE LTD |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA |
| CHECKED | RF | |
| MFG. APPR. | RF | D412-664-243 |
| APPROVED | RF | SHEET 4 OF 4 |
| DE APPR. | RF | SCALE |
| DATE | 09.09.30 | NTS |

DEO ATTACHED
RELEASED
2009-10-29
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| | | | | | | | |
|-----------------------------|--|---------------|---|--|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASSEMBLY (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D412-664-243-E-1 | SHEET NO. SHEET 1 OF 2 | SCALE NTS |
| DRAWN | CHECKED | MFG. APPR. | APPROVED | | DE APPR. | | |
| DATE 11.03.31 | DATE 11/03.31 | DATE 11.03.31 | DATE 11/03.31 | | DATE 11-03.31 | | |

PURPOSE:

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890.

CHANGE:

PARTS LIST IS AMENDED AS FOLLOWS:

IS:

| Item | Qty -243 | Part Number | Description |
|------|-------------|----------------|----------------|
| 6 | 0 | D2856-600-1009 | ABRASION STRIP |

WAS:

| | | | |
|---|---|----------------|----------------|
| 6 | 2 | D2856-600-1009 | ABRASION STRIP |
|---|---|----------------|----------------|

NOTES 2 AND 14, SHEET 1 ARE AMENDED AS FOLLOWS:

IS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA)
PAINT OUTSIDE PER DART QSI 005 4.2
AFTER PAINTING, APPLY CLEAR COAT ON HATCHED AREA
- 14) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3189-1
CHAFING SHIELD AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL
PROSEALED D3189-1 CHAFING SHIELD ONTO CROSSTUBE BY APPLYING A THIN COAT OF
PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.

WAS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF
CROSSTUBE PER QSI 035.

RELEASED
2011-04-07

| | | | | | | |
|-----------------------------|--|-------------------------------|---|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASSEMBLY (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | D.E.O. NO. D412-664-243-E-1 | SHEET NO. SHEET 2 OF 2 | SCALE NTS |
| DRAWN <i>[Signature]</i> | CHECKED <i>[Signature]</i> | MFG. APPR. <i>[Signature]</i> | APPROVED <i>[Signature]</i> | DE APPR. <i>[Signature]</i> | | |
| DATE 11.03.31 | DATE 11.03.31 | DATE 11.03.31 | DATE 11.03.31 | DATE 11.03.31 | | |

IS:

D3189-1 CHAFING SHIELD (1, INSTALLED OVER PROSEAL 890)
MS21920-28 CLAMP, 2X
2 PL

D412-664-603
BENT TUBE

2.00
1.00

WAS:

D2856-600-1009 ABRASION STRIP
D3189-1 CHAFING SHIELD (1, INSTALLED OVER ABRASION STRIP)
MS21920-28 CLAMP, 2X
2 PL

D3189-1
REF

**D412-664-243
ASSEMBLY DETAIL**

RELEASED
2011-04-07
[Signature]

MASK AREA PRIOR TO PAINTING AND
APPLY CLEAR COAT AFTER PAINTING

2.00

Q
SYM

| | | | | | | | |
|-----------------------------|---------------------------------------|------------------|---|--|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASS'Y (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D412-664-243-E-2 | SHEET NO. SHEET 1 OF 1 | SCALE NTS |
| DRAWN 90 | CHECKED ASS | MFG. APPR. E | APPROVED MP | | DE APPR. H | | |
| DATE 11.09.07 | DATE 11.09.19 | DATE 11.09.19 | DATE 11.09.19 | | DATE 11.09.19 | | |

PURPOSE:

REPLACE MAGNOBOND WITH 3M DP460 SCOTCH-WELD EPOXY ADHESIVE

87294

CHANGE:

IS:

| Item | Qty -243 | Part Number | Description |
|------|-------------|-------------------|--------------------------------|
| 9 | A/R | SCOTCH-WELD DP460 | EPOXY ADHESIVE, 3M SCOTCH-WELD |

WAS:

| | | | |
|---|-----|----------------|---|
| 9 | A/R | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE) |
|---|-----|----------------|---|

NOTE 12 & 16, SHEET 1 IS AMENDED AS FOLLOWS:

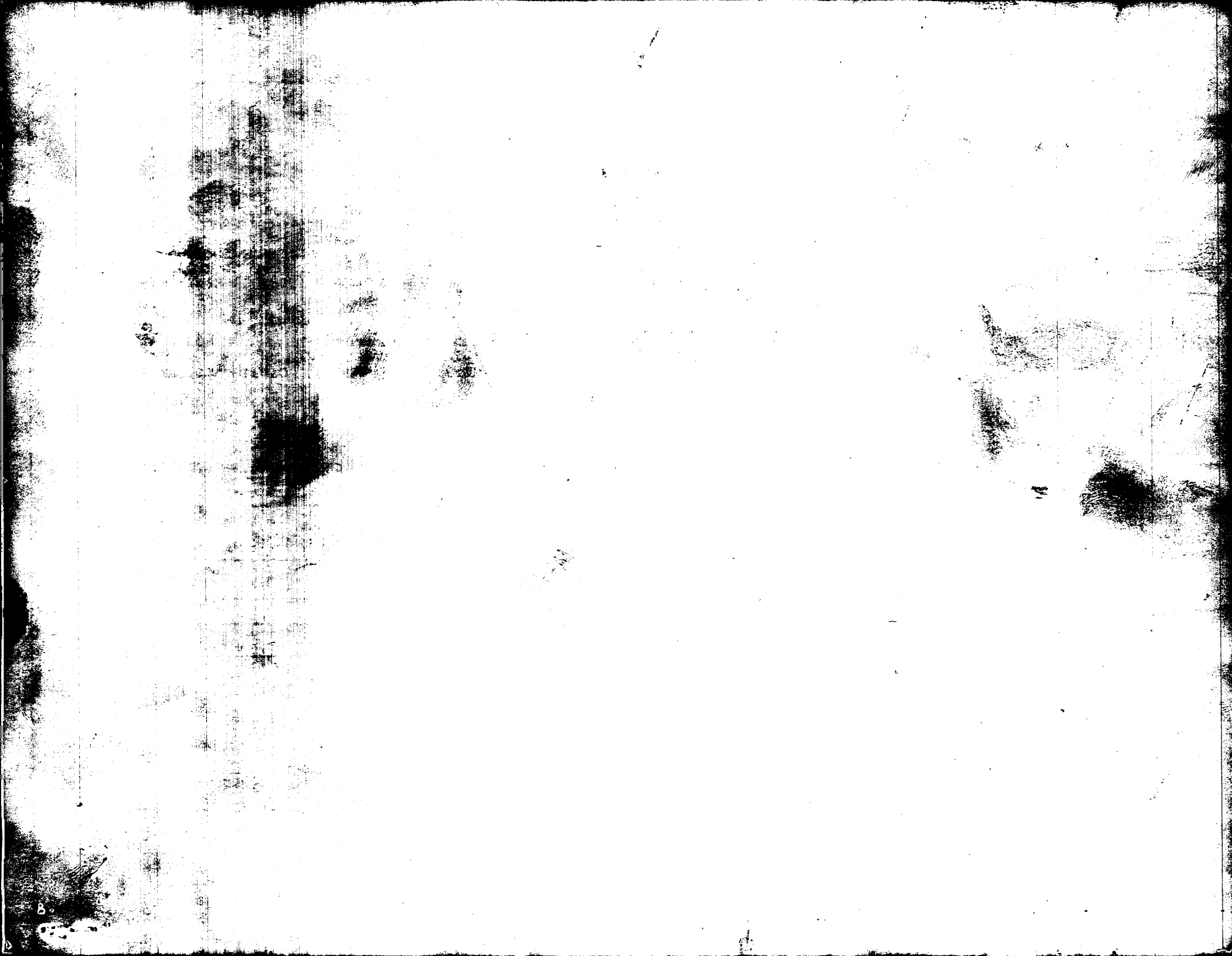
IS:

- 12) INSTALL D2896-1 CENTER SUPPORT USING A 0.04" TO 0.07" THICK LAYER OF SCOTCH-WELD DP460 PER QSI 015. LET CURE FOR 24 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER ADHESIVE HAS CURED FOR 24 HOURS.

WAS:

- 12) INSTALL D2896-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2896-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

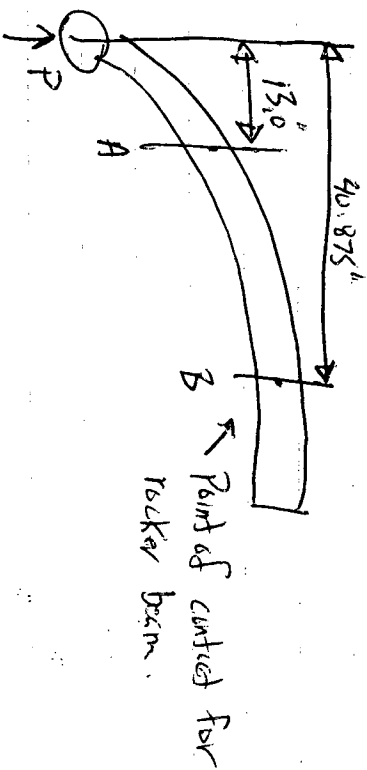
RELEASED
2011-09-29
MP



CRUSHING OF D41L-664-2.43

11.12.06

Acceptability of 8% CRUSHING AT END OF BEND



Point A: $WD_1 = 2.961$, $WD_2 = 2.522$

$CRUSHING = (2.961 - 2.522) / (2.961 + 2.522) = 8\%$
 $I = 1.676 \text{ in}^4$ (From AutoCAD)

Point B: $WD_1 = 3.307$, $I = 4.613 \text{ in}^4$

A: $F = Mc/I = P \times 13 \times 2.961 / 2 \times 1.676 = 11.484 \cdot P$
 B: $= P \times 40.875 \times 3.307 / 2 \times 4.613 = 14.651 \cdot P$

M.S. = $14.651 / 11.484 - 1 = 0.27$

Tube will break at rocker beam contact before area of 8% crushing, 8% crushing in area at end of the bend is acceptable

11.12.06



LIQUID PENETRANT TEST REPORT

P- 12677

| | | | | | | | | |
|------------------|-----------------------|-----------------|-------------------|-----------|------|-------------------------------------|----|--------------------------|
| CLIENT | DAIT AeroSpace | DATE | Jul 27/12 | PAGE | 1 | OF | 1 | |
| ATTENTION | MAT / LINDA | ACUREN JOB No. | 188-12-CO 295 | TIME | AM | <input checked="" type="checkbox"/> | PM | <input type="checkbox"/> |
| ADDRESS | 1270 ABERDEEN ST. | PO/NO No. | 17556 - | | | | | |
| | HAWKES BUNT ON. | WORK LOCATION | SAME | | | | | |
| PROJECT | F.P.I. on CROSS TUBES | ACCEPTANCE STD. | ASTM 1417/OSI-038 | REV./DATE | 2005 | | | |
| ITEM(S) EXAMINED | 10 PCS | | | | | | | |

| | | | | | | | |
|-----------------|--|-----------|----------|----------------------|-----------|-----------|-----------|
| JOB DESCRIPTION | PROCEDURE No. LT 002 | REV./DATE | 2008 | TECHNIQUE No. LT 002 | REV./DATE | 2008 | |
| PART No. | SEE RESULTS | | MATERIAL | ALUMINUM | | THICKNESS | VARIABLES |
| SCOPE | A WET FLOUORESCENT LIQUID PENETRANT EXAMINATION WAS DONE ON THE 100% OF SURFACE ONLY | | | | | | |

| | | | | | |
|-------------------|---|----------------------------------|--|--|--|
| TEST DETAILS | | | | | |
| METHOD | <input checked="" type="checkbox"/> FLUORESCENT | <input type="checkbox"/> VISIBLE | <input checked="" type="checkbox"/> WATER WASH | <input type="checkbox"/> SOLVENT REMOVABLE | <input type="checkbox"/> POST EMULSIFIED |
| FAMILY BRAND | MAGNAFLUX | | BLACK LIGHT S/N | 16459 | |
| PENETRANT | 2-LG7 | MINIMUM DWELL TIME | 45 MIN. | <input type="checkbox"/> OUTPUT > 1000 μ W/cm ² | <input type="checkbox"/> AMBIENT < 2 fc |
| PENETRANT REMOVER | H2O | MINIMUM DRY TIME | >10 MIN. | LIGHTING EQUIP. | <input type="checkbox"/> FLASHLIGHT <input type="checkbox"/> TROUBLELIGHT <input type="checkbox"/> OUTPUT > 100 fc @ SURFACE |
| DEVELOPER | SKD 52 | MINIMUM DWELL TIME | 10 MIN. | OTHER | LABINO |
| DEVELOPER TYPE | <input checked="" type="checkbox"/> NON AQUEOUS | <input type="checkbox"/> AQUEOUS | <input type="checkbox"/> DRY | LIGHT METER S/N | 1098866 |
| | | | | CAL DUE DATE | Jul 28 2012 |

| | | | | | |
|---------------------|---------------------------------------|--|--|---------------------------------------|---|
| TEST SURFACE | | | | | |
| SURFACE CONDITION | <input type="checkbox"/> AS GROUND | <input type="checkbox"/> AS WELDED | <input type="checkbox"/> MACHINED | <input type="checkbox"/> SHOT BLASTED | <input type="checkbox"/> CLEAN BARE METAL |
| SURFACE TEMPERATURE | <input type="checkbox"/> < -4°C/ 20°F | <input type="checkbox"/> -4°C/ 20°F TO 10°C/50°F | <input type="checkbox"/> 10°C/50°F TO 52°C/125°F | <input type="checkbox"/> > 52°C/125°F | |

| | | | |
|--|---|-------|---|
| RESULTS- (<input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL) | | | |
| CROSSTUBE W.O. # | | | |
| 1 | " | 87294 | ✓ |
| 1 | " | 87296 | ✓ |
| 1 | " | 87297 | ✓ |
| 1 | " | 87293 | ✓ |
| 1 | " | 86982 | ✓ |
| 1 | " | 86842 | ✓ |
| 1 | " | 86840 | ✓ |
| 1 | " | 86983 | ✓ |
| 1 | " | 86841 | ✓ |
| 1 | " | 83084 | ✓ |
| REMOVED ON THIS CROSSTUBE ONE TIME TO REMOVE INDICATION | | | |
| m/12-07-28 | | | |

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

| | | | |
|-------------------------|----------------------------|--------------|----------------------------|
| SIGNATURES | | DTR # | E-117397 |
| CLIENT REPRESENTATIVE | MAT MURDOCH | REPORT | |
| TECHNICIAN (SIGNATURE): | M. J. Joffe | REVIEWED BY: | |
| NAME (PRINT): | M. J. Joffe | NAME | INITIALS |
| CGSB LEVEL | 1 ST TECHNICIAN | CGSB LEVEL | 2 ND TECHNICIAN |
| CGSB REG. No | 6606 | CGSB REG. No | |